



## WASTE TIRE TRANSPORTER NOTIFICATION FORM

Department of Environmental Quality  
OMF/Waste Tire Section  
Post Office Box 4303  
Baton Rouge, Louisiana 70821-4303  
Phone: (225) 219-3891

### TO BE ASSIGNED BY DEPARTMENT

Agency Interest # \_\_\_\_\_  
DEQ Facility # \_\_\_\_\_  
Authorization Certificate # T- \_\_\_\_\_

### I. Applicant Information (Print Legibly or Type)

Name of Business/Government or Organization:	Contact Person:	
Name of Business Owner:	Physical Location/Street Address:	
Mailing Address:	City, State:	
City, State, Zip:	Zip:	Parish:
Parish:	Business Phone No:	Email Address:

### II. Documentation Required:

- Certification Fee - \$100 per year plus \$25 PER VEHICLE. Check or Money Order made payable to the LDEQ.
- Proof of **Commercial Liability Insurance** for each vehicle. Insurance must be valid within transporter registration period. Make, Model & VIN for each vehicle must be on Fleet Policy or Certificate of Insurance.
- Surety Bond in a minimum amount of \$10,000. (See Attachment for **REQUIRED** wording). If the Department currently has surety bond on file for your facility this is not needed.
- Copy of Vehicle Registration **or** Lease Agreement for each vehicle. Registration must be valid within transporter registration period. Lease agreement must include Make, Model, VIN and License Plate Number for each vehicle.
- Submit all fees and required documents to the address above.

### III. Vehicle Information: Use separate page for additional vehicles if necessary

Make	Model	Year	Vehicle License Plate Number	Registered Owner**

\*\*Application must be in the name of the registered owner. If leasing, must show proof of lease and insurance must be in lessee name.

### Certification:

I have personally examined and am familiar with the information submitted in this document and LAC 33:VII.Chapter 105, and hereby certify under penalty of law that this information is true, accurate, and complete to the best of my knowledge. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Print Name and Title

\_\_\_\_\_  
Date